Howes John H Form 4 January 03, 2019

### FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

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**OMB APPROVAL** 

response...

subject to Section 16. Form 4 or Form 5 obligations may continue.

See Instruction

Check this box

if no longer

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Howes John H

2. Issuer Name and Ticker or Trading Symbol

Global Indemnity Ltd [GBLI]

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

(Last)

(City)

Shares

(First)

(Middle)

(Zip)

3. Date of Earliest Transaction

X\_ Director

10% Owner Officer (give title Other (specify

3 BALA PLAZA EAST, SUITE 300

(Street)

(State)

12/31/2018

(Month/Day/Year)

below)

6. Individual or Joint/Group Filing(Check

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

36.23

BALA CYNWYD, PA 19004

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction	4. Securities on (A) or Dispose (Instr. 3, 4 and	sed of (D)	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	
(1115111 0)		(Month/Day/Year)	(Instr. 8)	(1115011.5) 1 411		Owned	Indirect (I)	Ownership
				(A	)	Following Reported Transaction(s)	(Instr. 4)	(Instr. 4)
			Code V	Amount (D	) Price	(Instr. 3 and 4)		
Class A Ordinary	12/31/2018		A	993 <u>(1)</u> A	\$	25,609	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: Howes John H - Form 4

	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transact Code (Instr. 8)	orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	<b>:</b>		Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
. 8	Director	10% Owner	Officer	Other		
Howes John H 3 BALA PLAZA EAST, SUITE 300 BALA CYNWYD, PA 19004	X					

# **Signatures**

/s/Stephen W. Ries Attorney-in-fact 01/03/2019

\*\*Signature of Reporting Person Da

#### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Represents the grant of 471 shares of restricted A ordinary shares under the Issuer's Share Incentive Plan that vest on the 24 month anniversary of the award in recognition of service rendered as a Board member to Global Indemnity Limited, and 522 shares of restricted A ordinary shares under the Issuer's share Incentive Plan that vest on the 24 month anniversary of the award in recognition of service rendered as a Board member to Global Indemnity Group, Inc., an indirect wholly-owned subsidiary of the Issuer.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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